(Column 1) FOR NUMBER FILE			(Column 2)	SMALL ENTITY		TY .	OR	OTHER TRAN SMALL ENTITY	
USIC FEE CER 1 16(0), (b), or (c))	NA	EO M	JMBEN EXTRA	RATE	(S) FE	E (1)		RATE (\$)	FEE (
ARCH FEE			NA .	- NVA	150	0.00	Γ	· NA	300.00
CFR 1 18(N). (I). OF (M) WAMINATION FEE	, N/A		N/A .	, N/A	\$2	50	-	1/001A	\$500
CFR. 1/16(Q); (p), or (Q))	N/A		NM	· ·NA	\$1	ÓO	F	N/A	\$200
OFR 1 16(1) DEPENDENT CLAIMS	mini	n 20 a	0	X\$ 25			OR -	X\$50 .	
CFR 1 16(h))		v4.3 :	0	/ X100	-	A	···	(200 _	·
PLICATION SIZE	If the apecification because the second of t	on and drawing the application	s exceed 100	1		4	- -	200 .	
E CFR 1 16(s))	8ddillonal 50 sh	or small entity) f	or each		X	•			
TIDLE DEDENOTED	33 0.3.C. 41(8)	(1)(G) and 37 C	FR 1.16(s).				}		1.
JLTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1, 16(j))			<u> </u>	+18/0=			1	360=	-
the difference in column 1 is less than zero, enter "O" in coli				OTAL				TOTAL	900
	ION AS AMÉNI	DED – PART I	t ı	· · · · ·			. •		
	AIMS	(Column 2)	(Column 3)	SMAL	L ENTITY	. 0	R .	OTHER	THAN
REM AF AMEN	AINING TER IDMENT	NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE (\$)	ADDI TIONA	ı	R	SMALL E	ADDI- TIONAL
Total (37 CFR 1.1e(i))	Minus	••	•	X\$ 25.	FEE (S		X\$5	-	FEE (t)
STOFR LIGHT	Minus		π	X100 _	 	OR	X20		-
Application Size Fee (37						OR	120		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(II))			R 1.16(0)	+180=		OR	+36	O=	
.*				TOTAL ADD'L FEE.		OR	TOTA ADD'L		
		(Column 2)	(Column 3)					L.	
(Соінт	Mc I	MICHECT I				_ `			
CLAI REMAI AFTI AMEND	NING :	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE (S)	ADDI- TIONAL		RAT	E (\$)	ADDI-
CLAI REMAI AFTI AMENDI Total CFR LIAGH	NING :	NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA			1		·	ADD(- TIONAL FEE (5)
CLAI REMAI AFTI AMEND Total CFR (.10(1)) Pependeral CFR (.10(A))	NING ER MENT Minus	NUMBER PREVIOUSLY PAID FOR	EXTRA	X\$ 25 .	TIONAL	OR.	X\$50		TIONAL
CLAI REMAI AFTI AMEND Total CFR LIAGH rependent CFR LIAGH plication Size Fee (37 C	MING ER MENT Minus Minus	NUMBER PREVIOUSLY PAID FOR	EXTRA.		TIONAL	OR.			TIONAL
CLAI REMAI AFTI AMEND	MING ER MENT Minus Minus	NUMBER PREVIOUSLY PAID FOR	EXTRA.	X\$ 25 .	TIONAL] .	X\$50	<i>a</i>	TIONAL

Inc. Highest number Previously Hald For (Iotal or Independent) is the highest number found in the appropriate box in column 1.

his collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the spirit of process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, schiding gathering, preparing, and cubmitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments in the amount of time you require to complete this form and/or suggestions for reducing this burdon, should be sent to the Chief Information Officer, U.S. Patern and Trademark Office, U.S. Department of Commence, P.O. Box 1450, Alexandria, VA 22313-1450.

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